

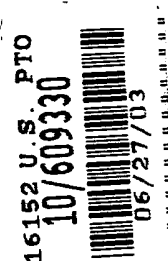


Attorney Docket No: ICON-018/01US

PATENT

Express Mail Label Number: EV 316 172 770 US  
Date of Deposit: June 27, 2003

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450



**UTILITY PATENT APPLICATION TRANSMITTAL**

Transmitted herewith for filing is a U.S. Non-Provisional Utility Patent Application entitled:

**CLUSTERING BIOLOGICAL DATA USING MUTUAL INFORMATION**

naming as inventors: Alexander M. Tolley

and including:

- ☒ (34) pages of description (before the claims);
- ☒ (7) pages of claims ((28) total claims; (5) independent claims);
- ☒ One (1) Sheet of Abstract;
- ☒ (1) sheets of drawing(s) including Figure 1.

1. Also enclosed are:

- ☐ executed Declaration
- ☐ Application Data Sheet
- ☐ Assignment and Assignment Recordation Cover Sheet
- ☐ Power to Prosecute
- ☐ Assertion of Entitlement to Small Entity Status
- ☐ Information Disclosure Statement
- ☐ Preliminary Amendment
- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- ☐ Nucleotide and/or Amino Acid Sequence Submission
  - ☐ Computer Readable Form (CRF) on 3 1/2" floppy disk
  - ☐ Specification Sequence Listing on:
    - ☐ CD-ROM or CD-R (2 copies); or
    - ☐ paper
  - ☐ The content of the copy in computer readable form is identical to the content of the paper, CD-ROM, or CD-R copy of the Sequence Listing.
- ☐ Non-publication Request and Certification

- ☐ Check No. \_\_\_ in the amount of \$\_\_\_ for the total fee as calculated below  
☒ Return receipt postcard  
☐ Other:

2. The filing fee has been calculated as follows ☐ and in accordance with the enclosed preliminary amendment:

	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee					\$750.00
Total Claims	28	- 20=	8	x \$18.00	144.00
Independent Claims	5	- 3=	2	x \$84.00	168.00
If multiple dependent claims are presented, add \$280.00					
Total Application Fee					1062.00
If an Assertion of Entitlement to Small Entity Status is enclosed, subtract 50% of Total Application Fee					
Other fees: (specify)					
<b>TOTAL FEE DUE</b>					<b>1062.00</b>

- ☒ This application is being filed without a filing fee. Issuance of a Notice to File Missing Parts of Application is respectfully requested.
- ☐ A check for the total fee is attached.
- ☐ Please charge \$\_\_\_ to Deposit Account No. (PA) 03-3117 (RE) 50-1283 for the total fee. This paper is being submitted in duplicate.
- ☒ The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 03-3117.

3. Please direct all correspondence concerning this application to:

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CUSTOMER NUMBER: **23419**

Dated: **June 27, 2003**

Respectfully submitted,  
**COOLEY GODWARD LLP**

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